SUPPLEMENT
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British Medical Association.

CURRENT NOTES.

Membership of the Association.

IN the period January 1st to March 6th, 1920, 801 new members have joined the British Medical Association. The number of members at the latter date was 21,774, showing a net increase of 419 as compared with the membership figure on December 31st last.

Reconstruction of the Territorial Medical Service.

THE Territorial Force Subcommittee has now arrived at certain conclusions with regard to the reorganization of the Medical Service of the Territorial Force. Until the publication of the White Paper by Mr. Churchill it was impossible to know what the views of the War Office were likely to be, and the Association was, therefore, not in a position to make criticisms. The opportunity has been taken to compare the Association's suggestions with those put forward in the White Paper, and the conclusion has been formed that the time is now opportune to carry the work a step further by communicating with the Director-General, Army Medical Service. Accordingly a letter embodying the views of the Association is being sent to the Director-General intimating that the Association would welcome an opportunity to elaborate its views by means of a deputation.

Senior Surgeon Commanders R.N.

At a meeting of the Naval and Military Committee, held on March 19th, further consideration was given to the question of senior surgeon commanders R.N. who are adversely affected by the new regulations for retirement and retired pay of naval officers. The Committee decided to continue to press for a revision of the regulations, and is urging the Admiralty to receive a deputation on the subject.

Insurance Statistics.

The Insurance Acts Committee, at its meeting on March 25th, referred to the executive the question of issuing to insurance practitioners a form showing certain particulars as to practice income and expenditure which could be used for the purpose of collecting statistics that may be wanted in the future. Experience shows that the lack of reliable figures has been a great handicap to the Committee on several occasions, and a determined effort is to be made to induce a large number of practitioners to keep figures in common form, so that if and when they are required they can be called in.

Right of Appeal against Removal from the Panel.

The November Conference of Local Medical and Panel Committees instructed the Insurance Acts Committee to take action on the first appropriate occasion to secure the right of appeal to the High Court of any practitioner whose name has been removed from the list. The Committee, taking advantage of the introduction of the National Health Insurance Bill, 1920, now before Parliament, has had an amendment drafted which it is asking Dr. A. C. Farquharson, M.P., to move. A notice as to the exact terms of this amendment and its place on the Order Paper will be given in a future issue, and those members of the profession who feel keenly on this subject should then write to their members of Parliament asking them to support the amendment.

Association Notices.

MEETING OF COUNCIL.

THE next Meeting of Council will be held on Wednesday, April 14th, in the Council Room, 429, Strand, London, W.C. 2., at 10 a.m.

SCHOLARSHIPS AND GRANTS IN AID OF SCIENTIFIC RESEARCH.

SCHOLARSHIPS.

THE Council of the British Medical Association is prepared to receive applications for Research Scholarships as follows:

1. An *Ernest Hart Memorial Scholarship*, of the value of £200 per annum, for the study of some subject in the department of State Medicine.
2. *Three Research Scholarships*, each of the value of £150 per annum, for research into some subject relating to the causation, prevention, or treatment of disease.

Each Scholarship is tenable for one year, commencing on October 1st, 1920. A Scholar may be reappointed for not more than two additional terms.

The Conditions of the award of Scholarships are stated in the Regulations, a copy of which will be supplied on application to the Medical Secretary of the Association, 429, Strand, London, W.C.2.

GRANTS.

The Council of the British Medical Association is also prepared to receive applications for Grants for the assistance of Research into the Causation, Treatment, or Prevention of Disease. Preference will be given, other things being equal, to members of the medical profession, and to applicants who propose as subjects of investigation problems directly related to practical medicine.

The Conditions of the award of Grants are stated in the Regulations, a copy of which will be supplied on application to the Medical Secretary of the Association, 429, Strand, London, W.C.2.

Applications.

Applications for Scholarships and Grants for the year 1920–21 must be made not later than Saturday, May 29th, 1920, in the prescribed form, a copy of which will be supplied by the Medical Secretary on application.

Each application should be accompanied by testimonials, including a recommendation from the head of

the laboratory, if any, in which the applicant proposes to work, setting out the fitness of the candidate to conduct such work, and the probable value of the work to be undertaken. This is not intended, however, to prevent applications for Grants in aid of work which need not be performed in a recognized laboratory.

MOTIONS FOR THE ANNUAL REPRESENTATIVE MEETING.

Notices of Motion by Divisions, Constituencies, or Branches, for the consideration of the Annual Representative Meeting, proposing to make any addition to, or any amendment, alteration or repeal of any Regulation or By-law, or to make any new Regulation or By-law, or proposing material alteration of the policy of the Association in matters relating to the honour and interests of the profession or of the Association, must be published in the JOURNAL not later than April 24th, and for this purpose should be received by the Medical Secretary ***not later than April 10th.***

PROPOSED FORMATION OF UGANDA AND EAST AFRICA BRANCHES.

NOTICE is hereby given to all concerned of a proposal made by the Uganda Division that the East Africa and Uganda Branch, and the East Africa and Uganda Divisions, be discontinued, and that new Division-Branches as follows be substituted therefor:

1. East Africa Branch,
2. Uganda Branch,

the areas of the new Branches to be co-terminous with the areas of the East Africa and Uganda Protectorates respectively.

The matter will be determined in due course by the Council. Any member affected by the proposed change and objecting thereto is requested to write, giving reasons therefor, to the Medical Secretary not later than July 31st, 1920.

BRANCH AND DIVISION MEETINGS TO BE HELD.

KENT BRANCH: MAIDSTONE DIVISION.—Dr. Arthur C. Black, Honorary Secretary (Strettit Place, East Peckham, Paddock Wood, Kent), gives notice that at a meeting of the Division to be held at the West Kent Hospital on April 8th at 3 p.m., Dr. N. Robertson, Superintendent of the National Sanatorium, Benenden, will read a paper on early signs of phthisis.

MIDLAND BRANCH: LINCOLN AND KESTEVEN DIVISIONS.—Dr. Godfrey Lowe, Honorary Secretary, Lincoln Division (42, Langworth Gate, Lincoln), gives notice that a meeting of members and non-members of the Lincoln and Kesteven Divisions will be held at Lincoln on Tuesday, April 27th, at 3 p.m. Dr. Alfred Cox, O.B.E., Medical Secretary, will attend and give an address, to be followed by a discussion. Further particulars will be announced later.

MEETINGS OF THE PROFESSION.

THE TRADE UNION QUESTION AT CHICHESTER.

A MEETING was held at the Dolphin Hotel, Chichester, on March 9th, with Dr. EWART in the chair, when Dr. Stancomb, Vice-President of the Medico-Political Union, and Dr. Main, its Organizing Secretary, met all the practitioners of Chichester and endeavoured to form a Chichester Branch of his union.

Dr. STANCOMB moved a resolution:

> That, in view of the changes in the medical service of the country, it is essential that the profession should be solidly organized on a trade union basis, to enable it to negotiate effectively with the Government, and that a Chichester branch of the Medico-Political Union be now formed.

He spoke at some length, and argued that the great value of trade union registration consisted in the liberty it accorded to take certain lines of coercive and restrictive action that might be necessary to protect the efforts of a combination striving for better conditions, such as would, unless protected by the Trades Disputes Acts, be actionable under the common law dealing with conspiracy and libel. The necessity for taking action of this character to counter attempts to "blackleg" the medical profession had been only too painfully demonstrated. The extreme danger of applying such methods without legal sanction had been driven home by the "Coventry" disaster, and the resultant memorandum D 19 of the British Medical Association, which exposed a condition of pitiful impotence. The contention of Dr. Cox and others, based on erstwhile dubious legal opinion, that medical men were not "workmen" within the meaning of the Act, had since November, 1919, been settled on the highest authority, and no obstacle to a medical trade union could any longer be urged on this score. Medical trade unionism had the advantage of maximum power and minimum risk, in virtue of the highly technical and costly nature of a doctor's education, rendering "dilution" on a large scale impossible, and by reason of the fact that in "withholding labour" there would not be, at any rate, entire cessation of income, such as would be the case with ordinary industrial trade unions; neither would there be the same danger of public obloquy, since doctors would not withhold their service from the community, but only from the conditions of some exploiting authority.

The registration of the British Medical Association (proceeded Dr. Stancomb) excluded all trade union action, and its Articles of Association were expressly drawn up to comply with this limitation. To state publicly, therefore, on behalf of the British Medical Association (as Dr. Cox had said at Newcastle and Bournemouth), "We have done, are doing, and shall continue to do, all that a trade union can do," was surely to boast of action both illegal and dishonourable. Dr. Stancomb complained of the action of the Insurance Acts Committee of the British Medical Association with regard to its fraternal relations with "the other side" in connexion with the new Regulations (M. 25), its strenuous efforts to get this jointly begotten child adopted by the profession, and its consequent hopeless position for taking up a strong attitude in defence of the profession against gross imposition and injustice—for example, transfer of practice. He would prefer a lawyer who did not evidently represent both parties and who conducted negotiation with the knowledge of a force behind him capable of redeeming such negotiation from the farce of academic discussion. He was pleased to note that in palliation of their complete failure to move the Government on the vital point of transfer of practice the Insurance Acts Committee said, "The resources of civilization are not exhausted." Dr. Stancomb maintained that to constitute itself such a "resource" when everything else had failed was all the Medico-Political Union claimed in a conference with the British Medical Association on joint action. Readers of the report (SUPPLEMENT, February 21st, 1920, p. 39) might justly conclude that a working agreement came very near to achievement. About 70 per cent. of the members of the Union were also members of the Association. There was no question of rivalry or destruction. There was ample scope for both organizations, imbued with one policy—the best interest of the community and the medical profession. Dr. Stancomb believed that in the near future wiser counsels would prevail, the profession in times of great danger would not discard any constitutional advantage, and at long last the medical profession would be adequately equipped for its own protection, and that of the community which it served. Dr. MAIN seconded the resolution.

After a few questions had been asked and answered, and one doctor had said that, after hearing Dr. Stancomb, he was inclined to change his previously unfavourable opinion, Dr. GARRATT moved an amendment:

> That this meeting of medical practitioners of Chichester entirely disapproves of the adoption by the profession of trade union practices, and considers that the best interests of their body will be better advanced by making use of their experience, education, and ability to educate lay opinion; and that measures in this direction should be taken by the British Medical Association.

Dr. Garratt combatted, in turn, the various arguments of Dr. Stancomb. He said that the educated classes stated by him to have adopted trade unionism were the worst paid of all; and if this was the result of trade unionism he would have none of it. He quoted from the address of Dr. Kaye le Fleming (BRITISH MEDICAL JOURNAL, SUPPLEMENT, October 25th, 1919) extracts showing that, owing to their varied and diverse interests, individualistic habits and training, and general independence, doctors were the last people in the world likely to submit to trade union rule. As regards the alleged absence of necessity for any strike fund, he said that doctors entirely dependent on panel practice would lose at once payment for all not sick, including unallocated persons, and even the sick, having by their contributions earned the right to free treatment, and being generally out of work and without wage, probably would not pay. In fact, the entire panel income might be regarded as a dead loss. Strikes were not always successful as stated. While strikes of large powerful unions against small bodies of employers often succeeded, strikes even of combinations of such unions against the State and community never did. The employers of doctors were the State and community, and if the panel doctors struck, they—a pitifully small and inexperienced minority — must strike against all the resources of the Government, of the approved societies, and the working community at the same time. It was an entire delusion to suppose that doctors were one whit more essential to the community than the latter to the doctors, who were, in fact, daily dependent on the community for every necessary of life, and therefore such strike must fail. If picketing were practised it would not be of blacklegs by the doctors, but of doctors by the public. The fundamental error made by doctors from the first had been entire neglect to consider and win over lay opinion. The laity controlled votes, and nothing but votes were powerful with governments. Trained speakers like Dr. Stancomb should appeal to the laity. Dr. Garratt quoted an instance where doctors in West Sussex, by meeting a number of representatives of approved societies, had practically removed that iniquity of the 1915 regulations in regard to chronic cases, which the Association had then made no attempt to deal with but actually approved. If the Insurance Acts Committee had not been a success, the remedy lay in reform of that body. Dr. Stancomb had suggested that a trade union would have struck on the issue of a 17s. 6d. capitation fee. Dr. Garratt held that such action would have been a blunder of the first magnitude. Personally, he was entirely opposed to over-payment of panel work. It

could only, by discouraging consulting practice, research and public health work, lower the status of the profession. It would, moreover, tend to attract the wrong sort of men, and that in such numbers as would soon, by overcrowding and underselling, reproduce all those evils from which doctors were temporarily relieved, and which they most desired to avoid. As regards promoting fellowship as alleged, the doctors of Chichester, without the union, were as friendly as those of Southampton; and he feared that trade unionism would tend to introduce men with whom it would be less easy to be friendly. In conclusion, he expressed the opinion that trade unions were governed by extremists; their methods were crude and barbarous, the general public most thoroughly detested them, and he hoped that even the Labour Party, once it had learned wisdom by experience of office, would itself take measures to restrict such practices. It would be deplorable if the medical profession, with long and honourable traditions, going back ages before the birth of trade unionism, should then begin to take them up.

After short discussion, in course of which the Chairman expressed his admiration of the work of the British Medical Association, Dr. Garratt's amendment was seconded by Dr. Bostock, and carried. It was then put again as a substantive resolution and passed *nemine contradicente*.

The meeting closed with a vote of thanks to Dr. Stancomb for his trouble in coming, and for his able address.

INSURANCE.

DINNER TO DR. BRACKENBURY BY THE MEMBERS OF THE INSURANCE ACTS COMMITTEE.

On March 25th the members of the Insurance Acts Committee entertained Dr. and Mrs. Brackenbury to dinner at the Grand Hotel, Charing Cross. The chair was taken by Dr. H. F. OLDHAM, one of the senior members of the Committee, and nearly the whole of the members were present. Letters of regret, expressing gratitude to Dr. Brackenbury for his services, were received from each of those who were absent.

The CHAIRMAN, in proposing the only toast of the evening, "The Chairman of the Insurance Acts Committee," said that the members of the Committee felt that the conclusion of the recent negotiations in respect of the new Regulations and remuneration was an appropriate time for them to express something of what they felt about Dr. Brackenbury and his work. As a chairman he was assiduous in his duties and always a master of his case, with the result that he had been a real leader of the Committee and of the profession. They recognized that Dr. Brackenbury, although a first-class fighting man, was much more than that. He was a statesman and he held the highest ideals as regards his profession. Nobody had put the claims of the general practitioner as the backbone of the medical service of the country more forcibly or more lucidly than Dr. Brackenbury had. The members of the Committee wished Dr. Brackenbury to have some tangible evidence of their admiration and on their behalf he presented him with a silver salver bearing the following inscription:

> Presented to HENRY BRITTEN BRACKENBURY, M.R.C.S., L.R.C.P., by the members of the Insurance Acts Committee, British Medical Association, March 25th, 1920, in grateful recognition and admiration of his work as Chairman during the years 1916–1920.

They welcomed Mrs. Brackenbury and desired to thank her for the way in which she must have helped her husband to enable him to sacrifice so much of his time and leisure in the interests of the profession, and he asked her to accept a silver card tray inscribed as follows:

> To Mrs. H. B. BRACKENBURY from the Insurance Acts Committee, British Medical Association, March 25th, 1920.

Dr. J. A. MACDONALD, Chairman of Council of the Association, said that, having been Chairman of the Committee before Dr. Brackenbury, he knew something of the work which it entailed. Though he had not had many opportunities of taking part in the work of the Committee recently, he had seen a good deal of Dr. Brackenbury's work on the Council of the Association, and had nothing but admiration for it. He wished to thank Dr. Brackenbury for the fine services he had rendered to the Association, for his activities had not been by any means confined to the Insurance Acts Committee, but had been given freely to other important committees of the Association.

Brief speeches were also made by Dr. DAIN, Dr. RIDLEY BAILEY; Dr. LINNELL, who specially voiced the gratitude of rural practitioners for the work Dr. Brackenbury had done for them; Dr. HUGH JONES, who spoke also for rural practitioners, and especially for those in North Wales, who, he said, had as great admiration of and gratitude for Dr. Brackenbury's work; Dr. MABEL RAMSAY, the representative on the Committee of the Women's Federation, who spoke for the Federation as well as for her own Panel Committee; and the MEDICAL SECRETARY, who said he owed a deep debt of personal gratitude to the guest of the evening for the enormous amount of work he had done which usually fell on a Secretary and which had been done at a time of exceptional strain on himself and staff.

Dr. BRACKENBURY, in replying, said that good artists always embellished the subject they were painting, and he had not previously realized how many good artists there were on the Insurance Acts Committee, for, after listening to the description of his character, he did not recognize himself. He had been gratified to hear that his fellow members proposed to entertain him at dinner, but he did not expect, and in fact was inclined to resent, the giving of a present to himself, for he had only been one of a band of workers, and if recognition were due at all it was due from the profession to the Committee as a whole. He was bound to say he had thoroughly enjoyed the work. In the course of considerable experience in public life he had always believed that the good committeeman was the man who brought his ideas into the common pool for the common good, and he had tried to be a good committeeman. He was very grateful for all that had been said about himself and his wife, and though the results of the negotiations they had carried on had not been all they had desired and expected, yet he thought the profession in general was satisfied that no effort on their part had been spared to place before the Government and the public the position of the general practitioner and his claims for recognition. He wished specially to thank Dr. Macdonald, who was Chairman of the Committee when he first joined it and had set an example there and elsewhere of chairmanship which was very difficult for any man to follow. The Committee was sorry that owing to the other claims on Dr. Macdonald's time they had not seen so much of him as they would have liked.

INSURANCE COMMITTEES.

COUNTY OF LONDON.

The late Sir Robert Morant.—The London Insurance Committee, at its meeting on March 25th, passed a vote of condolence with the relatives of the late Sir Robert Morant.

Large Panel Lists.—On the discussion of the new arrangements for the provision of medical benefit, Mr. P. ROCKLIFF complained that a list of 3,000, instead of being regarded as the extreme limit to be permitted only in very exceptional circumstances, was regarded as a normal figure, at all events for 1920 in London. Mrs. HANDEL BOOTH also complained that many doctors were not giving adequate service and were bringing the Act into disrepute. Mr. F. COYSH, chairman of the Medical Benefit Subcommittee, said that at the present time, out of 1,400 or more practitioners on the London panel, only seventy had lists of 3,000 or over, and, speaking generally, the men who had the largest lists were the most popular and efficient. Several of the medical members of the Committee pointed out that large lists had been forced on practitioners in crowded districts by penalizing those who limited their lists, and that the desirable thing was to induce the public to exercise more intelligence in the choice of doctor, instead of "running after" the man who had the largest list, with the idea that he was likely to be the best practitioner. Dr. LAURISTON SHAW said that with the present increase in numbers of medical students the position would adjust itself in the course of a few years.

Venereal Diseases.—A report was presented to the Committee surveying in a general way the position with regard to the treatment of venereal diseases. The Committee proposed to confer with the Panel Committee with a view to making joint representations to the Ministry of Health to secure that arrangements should be made for medical men and women with special gifts as public lecturers to deliver short addresses to carefully selected audiences on the health side of the question. It was agreed, with two dissentients—both of them medical members—that the Panel Committee should be asked to consider whether it was practicable and desirable that steps be taken to require all insurance practitioners to acquaint themselves with modern methods for the treatment of venereal diseases by post-graduate courses or otherwise; whether the surgeries of insurance practitioners were adapted for the adequate treatment of these diseases, and whether, under present conditions, an insurance practitioner had the necessary time to provide adequate treatment for these cases.

Naval and Military Appointments.

ROYAL NAVAL MEDICAL SERVICE.

THE following appointments are announced by the Admiralty:—Surgeon Commanders: C. H. Dawe to the *President*, additional, for W. T. Station, Bathurst; A. D. Spalding to the *Harebell*. Surgeon Lieutenant Commanders: C. M. R. Thatcher to the *Revenge*, for Physical and Recreation Training in First Battle Squadron (temporary); F. H. Stephens, O.B.E., to the *Calliope* on commissioning. Surgeon Lieutenants (temporary): G. B. Tarring to the *Douglas* on commissioning; J. A. Watson transferred to the permanent list (seniority October 20th, 1914).

ARMY MEDICAL SERVICE.

Lieut.-Colonel J. F. Martin, C.M.G., C.B.E., R.A.M.C., relinquishes the temporary appointment of D.A.D.G.

Major and Brevet Lieut.-Colonel H. V. Bagshawe, C.B.E., D.S.O., R.A.M.C., to be D.A.D.G.

ROYAL ARMY MEDICAL CORPS.

Lieut.-Colonel J. G. Gill, D.S.O., relinquishes the acting rank of Colonel.

Major C. R. L. Ronayne relinquishes the temporary rank of Lieutenant-Colonel.

Captain G. D'R. Carr, M.C., is seconded for service with the Egyptian Army.

The following relinquish the acting rank of Major: Captains O. B. Pratt, J. R. N. Warburton, M.C., E. C. Beddows, M.C., H. E. A. Boldero, temporary Captains J. Bamforth, G. F. Bird, M.C.

Captain E. W. Vaughan, D.S.O., M.C., to be temporary Major whilst specially employed.

A. T. Todd, O.B.E., late temporary Captain, to be temporary Major.

Captain T. J. Kelly, M.C., resigns his commission.

T. W. Smart to be temporary Lieutenant.

The following officers relinquish their commissions:—Temporary honorary Lieut.-Colonel W. R. Dawson, O.B.E., and retains the honorary rank of Lieut.-Colonel. Temporary Majors and retain the rank of Major: C. V. Mackay, H. D. Macphail (on ceasing to serve with the Northumberland War Hospital). Temporary Major H. H. Balfour, O.B.E. (Lieutenant-Colonel S.A.M.C.), on ceasing to serve with the South African General Hospital, Richmond. Temporary Captain Arthur J. Blake, M.C., and is granted the rank of Lieut.-Colonel. Temporary Captains and are granted the rank of Major: J. C. D. Allan, July 16th, 1919, and J. R. Pate, December 7th, 1919 (substituted for notifications in the *London Gazette*, August 16th, 1919, and January 19th, 1920, respectively), (acting Major) N. Dunn. Temporary Captains and retain the rank of Captain: W. H. Johnston, R. G. Smith, F. E. Webb, J. M. Morris (on ceasing to be employed with the Neath Section 3rd Western General Hospital), W. G. Riley, J. P. Crawford, P. L. Hope, F. D. Johnson, J. N. G. W. McMorris, E. Hesterlow, W. J. Lascelles, F. W. Watkyn-Thomas, R. G. Struthers, F. P. B. MacTavish, F. McG. Loughnane, J. Butterworth, J. W. Simon, T. G. Dickson, T. D. Morgan, F. W. Jackson, A. D. Moffat, M.C., F. W. Stuart, W. S. Booth, H. Somerville. Temporary Captains: W. F. G. Scott, C. A. Mason (on account of ill health).

ROYAL AIR FORCE.

MEDICAL BRANCH.

Transferred to unemployed list: Captain (acting Major) H. Gardiner-Hall, M.B.E.; Captain (acting Lieut.-Colonel) W. Darling, M.C.

The name of Flying Officer J. C. Smyth is as now described and not as stated in the *London Gazette* of August 19th, 1919.

INDIAN MEDICAL SERVICE.

Major N. E. H. Scott, C.I.E., has been posted as Civil Surgeon, Hazara (January 14th).

Lieutenant-Colonel J. C. H. Leicester, M.D., F.R.C.S., appointed permanently as Professor of Midwifery, Medical College, and Obstetric Physician and Surgeon of the Medical College and Hospitals, Calcutta (September 5th, 1919).

Captain E. S. Phipson, D.S.O., M.B., has been confirmed in the appointment of Health Officer, Simla (October 13th, 1918).

Captains to be Majors (February 1st): R. Knowles, W. E. Brierley, M.B., F.R.C.S., J. B. Lapsley, M.C., M.B., J. A. Shorten, M.B., R. B. S. Sewell, C. H. Fielding, M.B., W. L. Watson, O.B.E., J. W. Barnett, M.B., M. L. Puri, S. C. Pal, R. S. Townsend, M.C., M.B., R. B. Lloyd, M.B., A. C. Munro, M.D., A. G. Tresidder, M.D., G. G. Jolly, C.I.E., M.B., S. S. Yazifdar, J. J. H. Nelson, O.B.E., M.C., M.D., F.R.C.S.E., E. S. Phipson, D.S.O., M.B., F. F. S. Smith, M.D., T. C. Boyd, F.R.C.S.I.

Captain J. G. J. Green has been permitted to retire from the service on account of ill health (December 9th, 1919).

SPECIAL RESERVE OF OFFICERS.

ROYAL ARMY MEDICAL CORPS.

Captain A. Bulleid to be acting Major.

The following Captains relinquish their commissions: F. Oppenheimer, H. B. Sherlock, M.C. (on account of ill health caused by wounds and retains the rank of Captain).

Captain J. E. E. de Robillard resigns his commission.

QUEEN MARY'S ARMY AUXILIARY CORPS.

Auxiliary Section, R.A.M.C. Attached.—Medical Controller G. E. Sohtau relinquishes her appointment.

TERRITORIAL FORCE.

ROYAL ARMY MEDICAL CORPS.

Captain (acting Major) A. C. Walkin relinquishes the acting rank of Major on ceasing to be employed.

TERRITORIAL FORCE RESERVE.

The announcements concerning the following officers which appeared in the *London Gazette* of the dates indicated are cancelled: Captains N. F. W. Boeddicker (January 3rd and 17th, 1919), H. N. Crowe (December 31st, 1918), J. H. Hunter, M.C. (December 20th, 1918, and February 6th, 1919), (acting Major) A. C. Walkin (January 15th, 1919), D. A. Wilson (January 9th, 1919).

VOLUNTEER FORCE.

Temporary Lieut.-Colonels relinquish their commissions and are granted the honorary rank of Lieutenant-Colonel:—Durham R.A.M.C.V.: T. E. Hill. Kent R.A.M.C.V.: J. H. Yolland. Norfolk R.A.M.C.V.: G. H. Thompson. Northumberland R.A.M.C.V.: C. B. Palmer. Suffolk R.A.M.C.V.: A. W. Addinsell. Sussex R.A.M.C.V.: C. W. Owen, C.M.G., C.I.E (Lieut.-Colonel ret. I.M.S.).

Temporary Majors relinquish their commissions and are granted the honorary rank of Major:—Durham R.A.M.C.V.: D. McF. Millar, M. Buchanan, J. T. Dickson. Hampshire R.A.M.C.V.: W. J. G. Cattell, W. J. Smyth. Lincolnshire R.A M.C.V.: H. P. Berry (Major T.F. Res.). Norfolk R.A.M.C.V.: A. H. Meadows, J. K. Howlett, J. E. Linnell. Suffolk R.A.M.C.V.: H. G. Wood-Hill, H. E. Barnes, R. W. Mullock, J. R. Dobbin, J. F. C. Hossack, A. M. N. Pringle, C. K. Moseley, D. A. Carruthers. West Riding R.A.M.C.V.: H. G. Frankling, A. G. Reid.

DIARY OF SOCIETIES AND LECTURES.

ROYAL SOCIETY OF MEDICINE.—*Section of Obstetrics and Gynaecology*: Thursday, 8 p.m., Specimens. Short Communications:—Dr. Williamson and Dr. Brockman: Extensive Fatty Change in Fibro-myomata. Lady Barrett: Case with High Ammonia Coefficient. Dr. Williamson: Value of Blood Transfusion before Operation in Severe Secondary Anaemia. Dr. A. C. Palmer: Rupture of the Vagina during Labour (with Specimens and Epidiascope Demonstration by Dr. Holland). Mr. T. G. Stevens: Sacculation of Gravid Bicornuate Uterus. Annual General Meeting, Friday, 8 15 p.m. *Section of Anaesthetics*, Friday, 8.30 p.m.: Discussion on Anaesthesia in Operations on the Thyroid Gland, to be opened by Mrs. Dickinson Berry.

POST-GRADUATE COURSES AND LECTURES.

SHEFFIELD UNIVERSITY, PATHOLOGICAL MUSEUM.—Wednesday, 4 p.m.: Professor Connell: Pathology of Bone Disease.

WEST LONDON POST-GRADUATE COLLEGE, Hammersmith, W.—Daily, 10 a.m., Ward Visits; 2 p.m., Clinics, Operations (Out-patient Department is closed from April 1st to Tuesday, April 6th). Tuesday, 10 a.m., Dr. McDougal: Electrical Department; 2 p.m., Dr. Pernet: Skin Diseases. Wednesday, 10 a.m., Dr. Saunders: Diseases of Children; 2 p.m., Mr. Gibb: Eye Disease. Thursday, 2 p.m., Dr. Grainger Stewart: Nerve Disease; 2 p.m., Mr. Bishop Harman: Eye Department. Friday, 2 p.m., Dr. Morton: *X* Rays; Mr. Banks Davis: Throat, Nose, and Ear Diseases. Saturday, 2 p.m., Dr. Owen: Medical Cases.

British Medical Association.

OFFICES AND LIBRARY, 429, STRAND, LONDON, W.C.2.

Reference and Lending Library.

THE READING ROOM, in which books of reference, periodicals, and standard works can be consulted, is open to members from 10 a.m. to 5 p.m., Saturdays 10 to 1.

LENDING LIBRARY: Members are entitled to borrow books, including current medical works; they will be forwarded, if desired, on an application to the Librarian, accompanied by 6d. for postage.

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Diary of the Association.

APRIL.

1 Thurs. London: Grants Subcommittee, 11 a.m.
London: Organization Committee and Scrutiny Subcommittee (Joint Meeting), 2 p.m.
Brighton Division, Sussex County Hospital, 4 p.m.: Clinical Demonstrations (General).
7 Wed. London: Finance Committee, 2.30 p.m.
8 Thurs. Maidstone Division, West Kent Hospital, 3 p.m.
14 Wed. London: **Council**, 10 a.m.
16 Fri. London: Ministry of Health Committee.
20 Tues. London: Scrutiny Subcommittee, 2.30 p.m.
21 Wed. North Middlesex Division: Lecture by Mr. A. Fleming, F.R.C.S., on Vaccine Therapy.
27 Tues. Kesteven Division, Lincoln, 3 p.m.
28 Wed. Plymouth Division: Lecture by Sir Frederick Mott, K.B.E., F.R.S.: The Early Symptoms and Diagnosis of Diseases of the Spinal Cord.

APPOINTMENTS.

HOWELL, B. Whitchurch, F.R.C.S., Surgeon to the Royal Surgical Aid Society.

LAIRD, A. H., M.B.Dub., Officer in Charge *X*-ray and Electro-therapeutic Departments of the Coventry and Warwickshire Hospital.

CERTIFYING FACTORY SURGEONS.—J. A. Andrews, M.B. (Bovey Tracey District, co. Devon), H. A. C. Davidson, L.R.C.P. and S.Edin., L.R.F.P.S.Glas. (Coupar Angus District, co. Perth), H. D. Gasteen, L.R.C.P. and S.I., D.P.H. (Gamlingay District, co. Cambridge), R. T. Gilmour, M.R.C.S., L.R.C.P. (Maidenhead District, co. Berks), J. D. Hart, M.B., Ch.B. (North Walsham District, co. Norfolk), Dr. R. Miller (Stock District, co. Essex), P. H. Seal, M.B., B.S.Lond. (South Molton District, co. Devon), C. Tylor, M.D.Camb. (Long Melford District, co. Suffolk), C. M. Willmott, L.R.C.P. and S.Edin., L.R.F.P.S.Glas. (Leyland District, co. Lancaster); R. M. Yule, M.D.Aberd. (Lerwick District, co. Shetland).

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is **7s. 6d.**, *which sum should be forwarded with the notice not later than the first post on Tuesday morning in order to ensure insertion in the current issue.*

BIRTHS.

HORTON.—On March 27th, at 29, Westbourne Gardens, W.2, the wife of R. Lister Horton, F.R.C.S., of a son.

ISARD.—At 2, Arkwright Road, Hampstead, on March 18th, to Dr. and Mrs. C. V. Isard, of North Tawton, Devon, a daughter.

REINHOLD.—At the Anglo-American Hospital, Cairo, on March 6th, 1920, to the wife of Major C. Reinhold, M.C., I.M.S. (*née* Hayward), a son.

RICHARDS.—On March 23rd, at Castle Green, Llansawel, Carmarthenshire, to Dr. and Mrs. W. G. Richards, a son.

DEATH.

DANVERS.—On March 18th, at Mont-Boron, Nice, Herbert Danvers, M.D., formerly of Weymouth Street, London, W.

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